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FACSIMILE COVER SHEET

TO:	Ms. Dorothy Bell U.S. Patent and Trademark Office				
FROM:	Joseph W. Ragusa				
RE:	Application No.: 09/342,255 All. Docket No.: 35.C11293D1	oplication No.: 09/342,255 t. Docket No.: 35.C11293D1			
FAX NO.:	703-308- 5841 77 <i>22</i>				
DATE:	January 31, 2002	NO. OF PAGES:	14		
TIME:		SENT BY:			

MESSAGE

Pursuant to your request, attached please find duplicate copies of a Notice of Appeal and Petition for Extension of Time, Amendment after Final Action, and a Transmittal sheet therefor, all of which were mailed to the USPTO on January 3rd and 25th, 2002, respectively.

Respectfully Submitted,

Joseph W. Ragusa, Reg. No.: 38,586

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Response Under 37 C.F.R. § 1.116 Group Art Unit 2875

In re Application of:

Docket No. 03500.011293.1

MAKOTO OGURA

Application No.: 09/342,255

Examiner: T. Sember

Filed: June 29, 1999

Group Art Unit: 2875

For: LIGHT CONDUCTIVE MEMBER

ILLUMINATING DEVICE HAVING THE SAME, AND INFORMATION PROCESSING APPARATUS HAVING

THE ILLUMINATING DEVICE

Date: January 25, 2002

THE COMMISSIONER FOR PATENTS Box AF Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

		C	LAIMS AS AMEN	NDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT	,	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 14	MINUS	** 20	= 0	× \$9 \$18	0
INDEP. CLAIMS	* 2	MINUS	*** 3	= 0	x \$42 \$84	0
Fee for Mu	Fee for Multiple Dependent claims \$140°/\$280					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					0	

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. If the "Highest Number Previously Paid For" IN TIIIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

"Verified Statement claiming small entity status is enclosed, if not filed previously.

	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
Χ̈́	Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Respectfully submitted, (Re-arcutal '/31/02) Attorney for Applicants Registration No. 38, 566

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